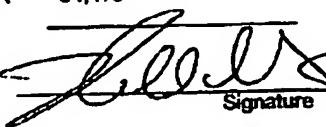


PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number: CS10858
In re Application of Application Number For Group Art Unit	Busean, Christopher et al. 10/074,114 Event Coordination in an Electronic Device to Reduce Current Drain 2681 Examiner Addy, Anthony S.	
Filed 2/11/02		
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above-identified application.		
The requested extension and appropriate non-small-entity fee are as follows: (Check time period desired):		
<input type="checkbox"/> One Month (37 CFR 1.17(a)(1)) \$ 110.00 <input type="checkbox"/> Two Months (37 CFR 1.17(a)(2)) \$ 450.00 <input checked="" type="checkbox"/> Three Months (37 CFR 1.17(a)(3)) \$ 1020.00 <input type="checkbox"/> Four Months (37 CFR 1.17(a)(4)) \$ 1590.00 <input type="checkbox"/> Five Months (37 CFR 1.17(a)(5)) \$ 2160.00		
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the amount shown above is reduced by one-half, and the resulting fee is \$ _____		
<input type="checkbox"/> A check in the amount of the fee is enclosed.		
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.		
<input checked="" type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account.		
<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required or credit any overpayment to Deposit Account No. 502117 Deposit Account Name: Motorola, Inc.		
<input type="checkbox"/> I have enclosed a duplicate copy of this sheet.		
I am the: <input type="checkbox"/> Applicant/inventor <input type="checkbox"/> Assignee of record of the entire interest. See 37 CFR 3.71. <input checked="" type="checkbox"/> Attorney or agent of record (Registration No.: 34,479) <input type="checkbox"/> Attorney or agent under 37 CFR 1.34(a) Registration number if acting under 37 CFR 1.34(a) 34,479		
<u>1-28-2005</u> Date		 Signature Randall S. Vaas Type or printed name
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. 00000009 502117 10074114 Submit multiple forms if more than one signature is required, see below.		
04/08/2005 01 FC:125 <input checked="" type="checkbox"/> Total of <u>1</u> form(s) are submitted		

Fee
Only

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